	Adución Act of 1988, nó pa NT APPLICATION F Suballinte	or Form PTO-876	WHOM KEO	ORD	Applopula	of pooker Himp
AP	LICATION AS FILED:	-PARTI				10/0/9.0
	(Column 1)	(Oolumn 2)	8	MALL ENTITY		OT US
EASIO FEE	NUMBER FILED :	NUMBER EXTR		Wer CHILLY	OR .	OTHER THA SMALL ENTI
BEAROHETE			RATI	(I) PEE (I		
101 OFR 1.10(k), (1), or (m)					~~~	RATEO
EXAMINATION FEE (8) OFR 1,18(0), (p), or (q))					7 -	
TOTAL CLAIMS (87 CFR 1.16(1))					-	
NOFFERNORIA OF THE STATE	minus 20 =	•	X O	<del></del>		
(87 OFR 1.16(N)	a 8 applin			76	OR XC	50
PPLICATION SIZE	If the specification and called to the special of paper, the special of the speci	rawings exceed to	x /00	<b>E</b> .	<b>—</b>	200
TEE 87 OFR 1.16(\$))	16 \$250 MANA #	IIVAUVII EIZA IAA AII			1, 1,00	-00 =
	35 U.S.C. 41(6)(1)(0)	adion glereof, See				
LULTIPLE DEPENDENT OF	AIM PRESENT (37 CFR-1.16	037 CFR 1.10(s).				1.
If the difference to column	( TOOLAT (37 CHR-1.16	0)	1 680	-	1 /-	
in some in column	I is less than zero, enter or in	column 2.	TOTAL		2	(es)
APPLICATI	ON AS AMENDED - F	ART II	τοιχι	L	. то	TAL
			. <i>:</i>	: .	· · ·	
CI CI	AIMO	(Column 3)	_ SMAL	L ENTITY	OR (	OTHER THAN
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thdependent (AT CHR L16(N)	Minus ···		x.25 =	FEE (1)		TIONAL
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	CFR 1.16(s))		x,000 =	<del>  </del>	OR x 02	aa .
The state of the s	MULTIPLE DEPENDENT CLAIM	(37 CFF( 1.16(I)) .	180	<del>  </del>		
	1	,	TOTAL		OR 36	0
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Independent HIOH LIGHT	Minus ***		x =	1	:	FEE(I)
Application Size Fee (37 Ci	R 1.16(s))		X =	0	-	=
FIRST PRESENTATION OF MI	ILTIPLE DEPENDENT OLAIM (8			Of	X	=
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f the section			TOTAL	OF	-	
The Highest Number Dead	es than the entry in column 2, louely Paid For IN THIS SPAC ously Paid For IN THIS SPAC usly Paid For Notal or Indepe	Wille *0* to make a	ADD'L FEE	OR	TOTAL ADD'L FEE	
the willer	lously Paid For IN THIS BPA ously Paid For IN THIS BPAC usly Paid For Motal or Indope usly Paid For Motal or Indope John Modernially is governed by:	www.v micolumn.s.	****			1 . 1

This collection of information is required by \$7.0FR 1.16. The information is required to obtain or retain a berreit by the public which is to file (and by line induding gathering, and submitting the completed application for reducing time you require to complete this form and/or suggestions for reducing files burden, should be sent to line the information of the amount of time you require to complete this form and/or suggestions for reducing titls burden, should be sent to line chief information officer. U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS